

ZILKA KOTAB

PC
ZILKA, KOTAB & FEECE™

95 SOUTH MARKET ST., SUITE 420
SAN JOSE, CA 95113

TELEPHONE (408) 971-2573
FAX (408) 971-4660

RECEIVED
CENTRAL FAX CENTER
JAN 24 2005

FAX COVER SHEET

Date: January 24, 2005	Phone Number	Fax Number
To: Examiner Marc Thompson		(703) 872-9306
From: Kevin J. Zilka		

Docket No.: XACTP015

App. No: 09/552,818

Total Number of Pages Being Transmitted, Including Cover Sheet: 22

Message:

Please deliver to Examiner Thompson.

Examiner Thompson,

While doing an audit of the above-identified file, we noticed that our response on December 3, 2004 has not shown up on PAIR.

Per your conversation with my paralegal, Erica Farlow, we are re-submitting our response with a copy of the Auto-Reply Facsimile Transmission sheet.

Please do not hesitate to contact us with any questions.

Thank you,

Kevin J. Zilka

☒ Original to follow Via Regular Mail ☒ Original will Not be Sent ☐ Original will follow Via Overnight Courier

The information contained in this facsimile message is attorney privileged and confidential information intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copy of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone (if long distance, please call collect) and return the original message to us at the above address via the U.S. Postal Service. Thank you.

IF YOU DO NOT RECEIVE ALL PAGES OR IF YOU ENCOUNTER
ANY OTHER DIFFICULTY, PLEASE PHONE Erica
AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

January 21, 2005

The information contained in this facsimile message is attorney privileged and confidential information intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copy of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone (if long distance, please call collect) and return the original message to us at the above address via the U.S. Postal Service. Thank you.

IF YOU DO NOT RECEIVE ALL PAGES OR IF YOU ENCOUNTER
ANY OTHER DIFFICULTY, PLEASE PHONE Erica
AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

PAGE 1/20 * RCVD AT 1/24/2005 12:39:34 PM [Eastern Standard Time] * SVR:USPTO-EFAXF-1/0 * DNIS:8729306 * CSID:408 971 4660 * DURATION (mm-ss):07-16

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT

RECEIVED
CENTRAL FAX CENTER
JAN 24 2005

In re the application of)
)
 Schweitzer et al.) Group Art Unit: 2142
)
 Application No. 09/552,818) Examiner: Thompson, Marc D.
)
 Filed: 04/20/2000) Attorney Docket No. XACTP015
)
 For: METHOD AND APPARATUS) Date: December 3, 2004
 FOR SESSION RECONSTRUCTION)
)

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner of Patents at facsimile number: (703) 872-9306 on the above date.

Signed:

Erica L. Farlow

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For	Present Extra	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS	30	20	10	X09 = \$	OR	X18 = \$180
INDEP CLAIMS	04	04	00	X44 = \$	OR	X88 = \$0
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$0		\$0
TOTAL				\$		\$180.00

- ☒ Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.
- ☐ Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees.
- ☒ If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. XACTP015). A copy of this sheet is enclosed for billing purposes.

Respectfully submitted,
 Zilka-Kotab, PC

Kevin J. Zilka
 Registration No. 41,429

P.O. Box 721120
 San Jose, CA 95172-1120
 Telephone: (408) 971-2573

(Revised 1/96)

PATENT

RECEIVED
CENTRAL FAX CENTER
JAN 24 2005IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of)

Schweitzer et al.)

Application No. 09/552,818)

Filed: 04/20/2000)

For: METHOD AND APPARATUS
FOR SESSION RECONSTRUCTION)

Group Art Unit: 2142

Examiner: Thompson, Marc D.

Attorney Docket No. XACTP015

Date: December 3, 2004

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner of Patents at facsimile number: (703) 872-9306 on the above date.

Signed: 

Erica L. Farlow

AMENDMENT B

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

Dear Sir:

In response to the office action mailed 11/03/2004, please enter the following amendments and remarks to the above mentioned patent application.

Attorney Docket XACTP015

-1-